For Commission Use Only: Case: 298

OFFICIAL FILE FORMAL COMPLAINT ILLWOIS COMMETICE COMPLSSION 527 E. Capital Avenue Springfield, Illinois 62701

ORIGINAL

Regarding a complaint by (Person making the complaint): John Harrington St. Germaine II
Against (Utility name): Ameren IP
As to (Reason for complaint) Billing issues
CHIEF CL
CLE CELLE
RX:0 D
in Champaign Illinois.
TO THE ILLINOIS COMMERCE COMMISSION, SPRINGFIELD, ILLINOIS:
My mailing address is 603 E. Clark SE #31 Champaign IL
The service address that I am complaining about is 603 E. Clark SC#31 Champaigh IL
My home telephone is [217] 355 -5277 (21820)
Between 8:30 A.M. and 5:00 P.M. weekdays, I can be reached at [217] 355 -5277
My e-mail address is will accept documents by electronic means (e-mail)
(Full name of utility company) $\underline{Ameren TP}$ (respondent) is a public utility and is subject to the provisions of the Illinois Public Utilities Act.
In the space below, list the specific section of the law, Commission rule(s), or utility tariffs that you think is involved with your complaint. 83-11. Admin. Part 280:130 (a)(1)(B)(D)
Have you contacted the Consumer Services Division of the Illinois Commerce Commission about your complaint?
Has your complaint filed with that office been closed?

extra sheet of paper if needed This complaint is about a total \$2,096.53 past
due ammount, in the name of two relatives, one deceased.
The bill was mailed to their addresses and pard by Them. Kecently
and unilaterally the bill was reasigned when @ 2,100 past due, with
a demand for full or a large partial payment and a payment
extra sheet of paper if needet) This complaint is about a total \$2,096.53 past due ammount, in the name of two relatives, one deceased. The bill was mailed to their addresses and part by them. Recently and unilaterally the bill was reesigned when @ 2,100 past due, with a demand for full or a large partial payment and a payment schedule. This is unjust, unreasonable, and health threatening.
Please clearly state what you want the Commission to do in this case: Marrian Service at this address,
with normal hook-up options at future addresses, allow the utility
Please clearly state what you want the Commission to do in this case: Maintain Service at this made that with normal hook-up options at future addresses, allow the utility to write aff the pest due ammount at no fault to person making complete and allow a payback from LIHEAP esfirating becomes requeilable, or other agencies. NOTICE: If personal information (such as a social security number or a bank account number) is contained in this complaint form or provided later in this
proceeding, you should submit both a public copy and a confidential copy of the document. Any personal information contained in the public copy should be obscured or removed from the document prior to its submission to the Chief Clerk's office. Any personal information contained in the confidential copy
should remain legible. If personal information is provided in your public copy, be advised that it will be available on the internet through the Commission's
e-Docket website. The confidential copy of any filing you make, however, will only be available to Commission employees. If you file both a public and
confidential version of a document, clearly mark them as such.
Today's Date: April 23,2008 Complainant's Signature: Ann Hitchermoinet
If an extranguish account you along the extrangle over address Admits and a set of the extrangle of the extr
If an attorney will represent you, please give the attorney's name, address, telephone number, and e-mail address.
William Control Cillian and the control of the cont
When you finish filling out this complaint form, you need to file the original with the Commission's Chief Clerk. When filing the original complaint, be sure to include one copy of the original complaint for each utility company complained about (referred to as respondents).
VERIFICATION
A notary public must witness the completion of this part of the form.
Land A St. Cornainess. Complainant, first being duly sworn, say that I have read the above petition and know
what it says. The contents of this petition are true to the best of my knowledge.
slen HSt. Hermaine II
Complainant's Signature
Subscribed and sworn/affirmed to before me.on (month, day, year) 1/2008
(NOAPIBAL SEAL!
Signature Notacy Public Illinois
My commission
NOTE: Failure to answer all of the questions on this form may result in this form being returned without processing.